		or Form P10-875	10N RECOR	D .	Appli	oction or Dook	MB control nu
APF	PLICATION AS FILED - (Column 1)	PART (Column 2)	Smal	LENTITY .	OR	् जा	ER THAN
FOR BASIC FEE	NUMBER FILED	NUMBER EXTRA	RATE (6) FEE (6)			SMALL ENTITY	
(87 OFR 1.16(e), (b), or (c)) SEARCH FEE (87 OFR 1.16(b), (l), or (m))				1		RATE (5)	FEER
EXAMINATION FEE (37 OFR 1.16(4), (p), or (d))	 	· ·	-		•		1
TOTAL CLAIMS (\$7 CFR 1.16(1))			-			•	1
NDEPENDENT CLAIMS (37 CFR 1.16(h))	minus 20 e		×25,00 =		OR	×50.00 =	
APPLICATION SIZE	If the specification and d	rawings exceed 100 ·	X00.09 =			×200.00 =	
FEE 37 CFR.1.16(s))	18 \$250 (\$125 4mm	ication ere tee due		1 1			1
	additional 50 sheets or fr 35 U.S.C. 41(a)(1)(G) an	93/CHR 1.16/e\			-		1
	LAIM PRESENT (37 CFR 1.16)				-		
	l is less than zero, enter 'o' in		TOTAL		<u> </u>	TOTAL	
. ~	ON AS AMENDED - P	ARTJI		• •		TOTAL	• •
-8-06 (001u	4.14365	ımn 2) (Column 3)	SMALL E	NTITY C	OR.	OTHER	THAN
REMA	ANING HUME	BER PRESENT	RATE (\$)	ADDI-	-	SMALL E	
Total AMENI	OMENT PAID PREVIO	OR		TIONAL FEE (\$)	Ľ	W(15 (\$)	ADDI- TIONAL FEB(\$)
Independent • 2	Minus ··· 2	* B	×25.00=	OF	×5	0.00 =	
Application Size Fee (37			×100.00=	OR	· ×2	00:00 =	
FIRST PRESENTATION OF	MULTIPLE DEPENDENT CLAIM	(37 CFR 1.16(D)		OR OR	-		
•			TOTAL ADD'L FEE	OR OR	TOT		
(Column					. AUU	LFEE _	
REMAIN AFTE	NUMBER SECTION	R PRESENT		ADDI-	RA	TE (\$)	ADDI
Total 4	Minus **	R		IONAL EE (\$)		. 1	TIONAL FEE (\$)
P7 CFR 1.16(1) Independent PY CFR 1.16(h)		• ,					

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 OFR 1.16(1))

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering; preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

TOTAL ADD'L FEE

TOTAL ADD'L FEE

OR